

| Under the Cast PASE reduction Act of 1995, no person are re | quired to | U.S. Patent | and Tradema | red for use through 0 ark Office; U.S. DEP on uniess it displays | 2/28/2007. (PARTMENT C | F COMMERCE | |
|--|-------------------|-------------------------------------|---------------------------|--|----------------------------|--------------|--|
| Effective on 12/08/2004. | Complete if Known | | | | | | |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Application Number | | 10/722,948 | | | |
| FEE TRANSMITTAL | | Filing Date | | November 25, 2003 | | | |
| For FY 2007 | | First Named Inventor | | Greg MARRIOTT | | | |
| F01 F1 2001 | | Examiner Name | | R. Liang | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | | 2629 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,120.00 | | Attomey Docket No. | | 106842005400 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | |
| Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-Identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge any additional fee(s) or underpayments of Credit any overpayments | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEE | s | | | | | | |
| FILING FEES Small Entity | SE/ Fee (\$ | ARCH FEES Small Entity Fee (\$) 250 | EXAMIN Fee (\$) 200 | IATION FEES Small Entity Fee (\$) 100 | Fees I | Paid (\$) | |
| | | | | | | | |
| Design 200 100 Plant 200 100 | 100 | 50 | 130 | 65 | | | |
| | 300 500 | 150 | 160 600 | 80 | | | |
| Reissue 300 150 Provisional 200 100 | 500 | 250 0 | 0 | 300 0 | | | |
| Provisional 200 100 2. EXCESS CLAIM FEES | U | U | U | U | | Small Entity | |
| Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 100 100 Multiple dependent claims 360 180 | | | | | | | |
| Total Claims | | | Multiple Dependent Claims | | | | |
| - = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) | | | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof. Fee (\$) Fee Paid (\$) | | | | | | | |
| - 100 = /50 (round up to a whole number) x = | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1252 Extension for response within second month 330.00 1801 Request for continued examination (RCE) (see 37 790.00 | | | | | | | |
| SUBMITTED BY | | | | | | | |
| ignature Clex Cline Registration No. (Attorney/Agent) 31,942 | | | | Telephone | (1.52) | | |
| Name (Print/Type) Alex Chartove | | | | Date | May 1, | 2007 | |